

Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 10-03-2010

Address: 446 CADILLAC ST.

Case #: 22F46408

LIGONIER, IN.

County: NOBLE

46767

Type of Laboratory Seizure (check one)

- ☐ Operational Lab
☒ Chemical/Glassware/Equipment (only)
☐ Dumpsite (only)

Seizure Location (check all that apply)

- ☒ Residence
☐ Outbuilding
☐ Vehicle
☐ Hotel/Motel
☐ Open - No Structure
☐ Other: _____

Items Found; Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☐ Lithium/Ammonia Reaction(s): _____
☐ Red Phosphorous/Iodine Reaction(s): _____
☒ Flammable Solvents: bedroom
☐ Water Reactive Metal (Lithium): _____
☐ Anhydrous Ammonia: _____
☐ Hydrochloric Acid Gas Generator(s): _____
☐ Corrosive Acid: _____
☒ Corrosive Base: bedroom
☒ Other (item and location): Ammonia Nitrate/ bedroom

Child under age 18 discovered (check one)

- ☐ Yes _____ (number present)
☒ No

*If yes, fax report to Child Protective Services

Investigative Information

- ☐ Ephedrine/Pseudoephedrine Tracking Log
☐ Retail/Merchant Tip
☒ Other: LIGONIER PD

This report is to be faxed to the following agencies that serve the location:

Fire Department: LIGONIER FD

Fax: E-MAILED

Health Department: NOBLE CO

Fax: E-MAILED

Child Protection Service: _____

Fax: _____

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: ANDREW SMITH Phone 260-432-8661

** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

*** This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.